

San Benito County System Improvement Plan

for the period 10/1/04 – 9/30/04

Children's Protective Services
Health and Human Services Agency
San Benito County

Submitted: September 30, 2004

California's Child and Family Services Review System Improvement Plan	
County:	San Benito
Responsible County Child Welfare Agency:	San Benito County Health and Human Services Department
Period of Plan:	October 1, 2004 – September 30, 2005
Period of Outcomes Data:	(1) Quarter ending June 30, 2003
Date Submitted:	(2) September 30, 2004
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Submitted by each agency for the children under its care	
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Name:	Marilyn Coppola
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Submitted by:	County Chief Probation Officer
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Signature:	

System Improvement Plan Narrative

I. Local Planning Bodies

Being a county large in area, but small in population, the stakeholders in the child welfare system are frequently involved on the same commissions and planning groups working to improve human services for San Benito citizens. Many of the members of the Child Welfare Commission and the Community Assistance Network were also involved in conducting the child welfare department's self assessment. These same groups and the Child Welfare Commission in particular, are available to support the implementation of the System Improvement Plan.

Child Welfare Commission: Constituted in 1983 as the child abuse prevention agency for San Benito County, the Commission oversees disbursement of CAPIT and CBFERS monies as well as providing oversight to the Agency's Family Resource Center. Membership includes Probation (co-chair with Health and Human Services), a local group home agency that is a contracted service provider, the County Office of Education, Public Health, Mental Health, the District Attorney's office, business community representatives and private citizens.

Community Assistance Network: Launched only a year ago, in 2003, this is a collaboration of many agencies with a focus on the needs of youth. It is charged with maximizing resources serving youth by examining the planning initiatives of each of the member agencies. A long-term objective may be the development of a youth-focused strategic plan. Member agencies include the County Office of Education, law enforcement, Health and Human Services, and the YMCA.

Self Assessment Team: The following members and guests of the Self Assessment Team contributed to the analysis of current performance of the child welfare department and selection of those outcome indicators addressed in the System Improvement Plan.

Kay Gibson	Assistant Director, SBCHHSA, Team Chair
Marilyn Coppola	Director, SBCHHSA
Vivian van Dal Tiboni	SS Supervisor II, SBCHHSA
Donna Elmhorst	SS Supervisor I, SBCHHSA
Maria Corona	Supervisor FRC, SBCHHSA
Adelina Hernandez	Parent
Stella Torres	Parent
Tina Armer	Asst. Chief Probation Officer, SBC Probation
Kim Dryden	Special Projects Coord., SBC Office of Education
Rev Ardyss Golden	Foster Parent
Karla Thomas	Public Health Nurse, SBCHHSA
Dr. Carol Johnson-Schrotlen	SBC Mental health
Rosalie Gutierrez	CDSS Adoptions

Self-Assessment Team Guests

Social Workers

Juan Perez
Alice De Noris
Lucy Perez
Gloria Valenzuela

Londa Gilmore
Jim Plourd
Vickie Iles

Rosalie Betancourt
Aaron Thompson
Tracy Belton

Consulted for the Self-Assessment

Curtis J. Hill
Karen R. Forcum
Deborah Botts
Honorable Judge Harry Tobias

San Benito County Sheriff-Coroner
County Counsel
Chief Probation Officer
Superior Court Judge

II. Findings that Support Qualitative Change

Given the short time frame in which to complete the Self-Assessment and the local resources available for use, the Department did not conduct any additional research such as focus groups, customer surveys, etc. in support of the Self-Assessment.

III. Attach the Summary Assessment of the County Self-Assessment Report**Section V Summary Assessment****Discussion of System Strengths and Areas Needing Improvements**

San Benito County Health and Human Services Agency has identified the following four areas for inclusion in its System Improvement Plan.

1. Outcome indicator 1B, recurrence of maltreatment within 12 months
The Agency's performance of 22% to 25% on this state-enriched indicator will be further analyzed and addressed in the SIP. However, this is an example of a counterbalanced indicator. If an agency performs well on the reunification within 12 months indicator then there is increased probability that the agency will have a higher rate of recurrence of maltreatment. In cases of high rates of recurrence a child welfare agency should examine the following:
 1. Use of a risk assessment tool (is one used, for every case, which model)
 2. Differences in assessment among ER staff
 3. Decision-making on closing a substantiated case
 4. Decision-making on filing or working to get a voluntary family maintenance agreement
 5. Supervision regarding risk assessment and these decision-making points
 6. Services that may not be readily available (anger management, parenting classes, parent aides, etc) that could address recurrence-related concerns.

2. Process indicator 2B, percent of child abuse/neglect referrals with a timely response, and,
3. Process indicator 2C, timely social worker visits with child.
Addressing both of these indicators require similar approaches. It is not unusual that the first explanation for non-compliance given for these indicators is lack of social worker time or lack of clerical support for data input. One way to determine if that is the case is to learn if case files indicate that the investigation or child contacts were completed within the required timeframes. Other explanations for this performance include time and caseload management practices of individual workers and oversight by the supervisor. Ways to address the performance include improved use of information management tools such as CWS/CMS management reports, or purchasing a tool such as Safe Measures, an application for CWS/CMS that allows supervisors to immediately track outcomes and compliance-related issues.
4. Foster/adoptive parent recruitment, licensing and retention. Addressing this systemic factor by taking a more planned, coordinated, community-wide approach to recruitment and retention of foster parents will add to the supply of county-licensed foster homes. Increasing the supply of in-county foster homes will contribute to improvement in outcome indicators such as reunification, placement with siblings, and multiple placements. It may also assist with improvements in concurrent planning and permanency planning practices.

The County performs well in the following outcome areas and systemic factors:

- Rate of maltreatment in foster care
- Length of time to exit foster care to reunification
- Multiple foster care placements
- Siblings placed together
- Foster care placement in least restrictive settings
- Children transitioning to self-sufficient adulthood
- Case review systemic factor – specifically court structure and relationship and timely notification of hearings are both strengths.
- Service array (while services are not plentiful, the Agency does a good job of maximizing those services available)
- Agency collaborations

In addition to the items being addressed in the System Improvement Plan, the Agency should focus attention on these outcome indicators and systemic factors:

- Recurrence of maltreatment when child not removed from home: As the larger, overall indicator, 1B, recurrence of maltreatment, is being addressed in the SIP; this indicator will be impacted by those strategies and activities.

- Length of time to exit foster care to adoption: The Self-Assessment process has launched what will prove to be a helpful dialogue between Agency staff and CDSS Adoptions that will improve adoption practices for children.
- Use of a management information system: Timely and accurate data input will be addressed in the SIP as the Agency works on improving its rate of timely investigations and monthly social worker contacts with the child.
- Case review systemic factor: Parent and youth participation in case planning is an area to be addressed. In the “General Case Review” section, the development of policy and procedures will help improve performance in concurrent and permanency planning.
- Quality assurance: The Agency needs to address quality assurance practices throughout the system.
- Staff/provider training: The Agency should examine improving on-going training of staff and providers.

Areas for further exploration through the Peer Quality Case Review

There are a couple of potential practice-related areas for exploration through the PQCR.

- Improving parent and youth participation in case planning. We would like to learn of promising practices related to family engagement and ways to improve our practice in this area.
- Social work practices in time and case management and the tips and techniques used by high performing staff need to be discovered and shared with all staff. We would like to learn from other counties how they address some of the time, workload, and paperwork constraints that challenge our staff.

System Improvement Plan Components

In the next section are the following four System Improvement Plan components:

Component A 2B Child and abuse neglect referrals by time to investigation
Improvement Goal: Increase compliance from 67% to 90%.

Component B 2C Social worker visits
Improvement Goal: Increase compliance of social worker visits from 48.1% to 90%.

Component C 1B Recurrence of maltreatment within 12 months
Improvement Goal: Reduce recurrence of maltreatment to 15%.

Component D Systemic Factor: Foster parent recruitment, licensing and retention
Improvement Goal: Increase the number of county licensed homes by 100% (6 to 12 homes) by June 2005

Component A**Outcome/Systemic Factor:****2B Child and abuse neglect referrals by time to investigation****County's Current Performance:**

Currently San Benito has a 67% compliance rate in 10 day investigations.

Improvement Goal 1.0

Increase compliance from 67% to 90%.

Strategy 1. 1

Review and adjust intake/screening and assignment processes to address possible system issues that may delay timely investigations.

Strategy Rationale

It is important that screening and assignment are timely to provide worker with ample time to perform 10 day investigation.

Milestone	1.1.1. Review sample of cases from referral to investigation to plot case flow, timelines, and assignment and other variables such as type of referral, geographic area, cultural issues, etc. that may affect delay in timely investigation.	Timeframe	November 2004	Assigned to	Supervisor, Consultant, Director
	1.1.2 Write, approve and distribute policy related to investigation expectations.		December 2004		Consultant, Director, Supervisor
	1.1.3 Analyze workflow and reassign some duties to assure timely entry of referral and forwarding to assigning supervisor.		January 2005		Supervisors & Director
	1.1.4 Pilot use of dedicated worker for 10-day investigations (1 FTE) and dedicated IR worker (1 FTE).		January – March 2005		Supervisor, Deputy Director

	1.1.5 Evaluate and make needed corrections to workflow adjustments and pilot.		April - May 2005		Deputy Director, Director
Strategy 1.2 Review all policies and supervision practices related to timely data entry of 10 day visits			Strategy Rationale During the Self Assessment Department staff stated that data entry issues were the primary explanation for noncompliance with 10 day investigation outcome.		
Milestone	1.2.1 Write policy regarding dept. expectations of timely data entry for all outcome-related data.	Timeframe	November 2004	Assigned to	Consultant, Director
	1.2.2 Policy approved and shared with staff.		December 2004		Director, Supervisors
	1.2.3 Clean-up period instituted for data entry that would be out of compliance under new policy.		January - February 2005		Social workers, Supervisors
	1.2.4 New policy instituted.		March 2005		Supervisors
	1.2.5 Using Safe Measures (CWS/CMS management reports OR random case checks) staff accountability for following new policy is reinforced by supervisors.		April 2005 and ongoing		Supervisors, Deputy Director
Strategy 1.3 Using Safe Measures or other available monitoring tools, obtain and monitor worker-specific data for investigation compliance to support worker performance and compliance with data entry expectations and timely investigations.			Strategy Rationale On-going supervisory monitoring is necessary to assure timely investigations and data input. Safe Measures is a user-friendly application that can be integrated into worker/supervisor meetings and helps to monitor worker and unit performance. On-going monitoring of worker data input.		

Milestone	1.3.1 Investigate the acquisition of Safe Measures by county	Timeframe	April 2005	Assigned to	Director
	1.3.2 If Safe Measures is acquired: policy regarding supervisors and administrators' use of Safe Measures is written and approved.		August 2005		Deputy Director
	1.3.3 Variance in unit and worker compliance identified through use of Safe Measures.		October 2005		Supervisors, Deputy Director
	1.3.4 Supervisors address individual variances to improve compliance.		November 2005		Supervisors
	1.3.5 Supervisors meet monthly with Deputy Director to review Safe Measures compliance data.		January 2006		Supervisors, Deputy Director
	1.3.6 Improvements in compliance are recognized and celebrated.		Spring 2005 and quarterly thereafter		Supervisors, Administration Team
Describe systemic changes needed to further support the improvement goal. MIS (CWS/CMS): We are developing and enforcing a policy regarding timely entry of data into CWS/CMS. We believe that data entry issues are a large part of why we did not do well on this outcome and we also recognize that the usefulness of a monitoring tool such as Safe Measures is compromised without timely data entry.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. Training in CWS/CMS management reports and/or Safe Measures. Training may also be needed for staff regarding new policies related to data entry, investigation timelines, workflow changes and the pilot project of dedicated 10-day and IR workers.					
Identify roles of the other partners in achieving the improvement goals. Not applicable.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None.					

Component B

Outcome/Systemic Factor: 2C Social worker visits					
County's Current Performance: For the quarter ending June 30, 2003 compliance with social worker visits ranged from 43.4% to 48.1% (revised).					
Improvement Goal 1.0 Increase compliance of social worker visits from 48.1% to 90%.					
Strategy 1.1 Review all policies and supervision practices related to timely data entry of monthly social worker contacts				Strategy Rationale During the Self Assessment Department staff stated that data entry issues were the primary explanation for noncompliance with monthly social worker contacts.	
Milestone	1.1.1 Write policy regarding dept. expectations of timely data entry for all outcome-related data.	Timeframe	November 2004	Assigned to	Consultant, Director
	1.1.2 Policy approved and shared with staff.		December2004		Director, Supervisors
	1.1.3 Clean-up period instituted for data entry that would be out of compliance under new policy.		January - February 2005		Social workers, Supervisors
	1.1.4 New policy instituted.		March 2005		Supervisors
	1.1.5 Using Safe Measures (CWS/CMS management reports OR random case checks) staff accountability for following new policy is reinforced by supervisors.		April 2005 and ongoing		Supervisors, Deputy Director
Strategy 1.2 Using Safe Measures, obtain and monitor worker-specific data for			Strategy Rationale Safe Measures is a user-friendly application that can be integrated into		

investigation compliance to support worker performance and compliance with data entry expectations and timely investigations.			worker/supervisor meetings and helps to monitor worker and unit performance.		
Milestone	1.2.1 Investigate the acquisition of Safe Measures by county	Timeframe	April 2005	Assigned to	Director
	1.2.2 Policy regarding supervisors and administrators' use of Safe Measures is written and approved.		August 2005		Consultant, Director
	1.2.3 Variance in unit and worker compliance identified through use of Safe Measures.		October 2005		Supervisors, Deputy Director
	1.2.4 Supervisors address individual variances to improve compliance.		November 2005 and on an on going basis.		Supervisors
	1.2.5 Supervisors meet monthly with Deputy Director to review Safe Measures compliance data.		November 2005 and on a monthly basis.		Supervisors, Deputy Director
	1.2.6 Improvements in compliance are recognized and celebrated.		January 2006 and quarterly thereafter		Supervisors, Administration Team
Strategy 1. 3 Provide training and coaching to support staff in completing monthly visits and performing timely data entry.			Strategy Rationale Sharing good worker practices and training in how to enter contacts quickly and accurately will support staff and demonstrate philosophy shift that we must document our hard work in CWS/CMS.		

Milestone	1.3.1. In-compliance workers are identified and their work techniques and tips are Identified.	Timeframe	January 2005	Assigned to	Supervisors, Workers
	1.3.2 Research practices of other counties in entering of contacts into CWS/CMS accurately and quickly.		February 2005		Deputy Director
	1.3.3 Train all staff on best practices of their colleagues and on quick contact entry technique.		April 2005		Supervisors, Deputy Director
	1.3.4 Supervisors are monitoring compliance on regular basis.		May 2005 and ongoing		Supervisors and Deputy Director
	1.3.5 Staff coached who continue out of compliance.		May 2005 and ongoing		Supervisors
Strategy 1.4 Assure that all staff understand expectations related to monthly social worker contacts with child.		Strategy Rationale During the Self Assessment we learned that some staff may not accurately calculate when visits are due.			
Milestone	1.4.1 Create department policy regarding monthly visits.	Timeframe	November 2004	Assigned to	Consultant and Director
	1.4.2 Train staff in policy.		December 2004		Supervisors
	1.4.3 Coach staff in following policy correctly.		January 2005 and ongoing		Supervisors
Strategy 1.5 Increase supply of county licensed foster homes.		Strategy Rationale An increased supply of local, county licensed homes will decrease driving time by workers to out-of-county placements and make it easier to complete monthly contacts.			

Milestone	1.51 Implement SIP component related to “Foster parent recruitment, licensing and retention” (which see).	Timeframe	October 2004 – June 2007	Assigned to	Director
Describe systemic changes needed to further support the improvement goal. Improve recruitment, licensing and retention of county licensed foster homes					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. Staff will require training in new policies, in tips and techniques for data entry from in-compliance workers. Supervisors will require training in Safe Measures.					
Identify roles of the other partners in achieving the improvement goals. No other partners involved.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None.					

Component C

Outcome/Systemic Factor: Outcome indicator 1B: Recurrence of maltreatment within 12 months.					
County's Current Performance: The County current performance is 22% (for cases with a <i>first substantiated referral</i> in the base year) to 25% (for cases with <i>any referral</i> in the base year)					
Improvement Goal 1.0 Reduce recurrence of maltreatment to 15% by September 2007.					
Strategy 1. 1 Implement a safety/risk assessment process.			Strategy Rationale The self assessment process discovered that there may be differences in decision-making and casework quality among workers within different programs . A safety/risk assessment protocol can serve to minimize these differences.		
Milestone	1.1.1 Explore use of “Fresno” risk assessment model (interview counties using it, review past use in San Benito)	Timeframe	July-August 2005	Assigned to	Deputy Director, Supervisors
	1.1.2 Write policy for and train staff in risk model.		By November 2005		Deputy Director, Supervisors, Training Academy
	1.1.3 Implement safety/risk assessment strategy.		January 2006		Supervisors and Deputy Director
	1.1.4 Coach staff in use of model, monitor use by staff.		March 2006 and ongoing		Supervisors and Deputy Director
Strategy 1. 2 Address differences in assessment and casework quality among staff through supervision.			Strategy Rationale Implementing a risk assessment protocol will address some differences in assessment and casework but most differences are a supervisory responsibility.		
Milestone	1.2.1. Using actual cases, supervisors and deputy director meet to share casework and decision-making practices and develop more consistent department-wide philosophy and policy development re reunification, risk assessment, etc.	Timeframe	December 2005	Assigned to	Supervisors and Deputy Director

	1.2.2 Supervisors take training in supervisory topics such as feedback, coaching, supervising staff for accountability, family engagement.		January – December 2006		Supervisors and Deputy Director
	1.2.3 Supervisors implement improved coaching and supervisory practice with workers to assure consistency in assessment, decision-making and case planning.		June 2006 and on-going		Supervisors and Deputy Director
Strategy 1. 3 Increase cross-disciplinary training and case staffings with partner agencies that provide services to CPS families.			Strategy Rationale Concern expressed that staff of some partner agencies may not have the expertise, knowledge or skill to work with multi-problem child welfare families. This may contribute to ineffective service plans and treatment outcomes leading to recurrence of maltreatment.		
Milestone	1.3.1 Using existing groups (e.g. Child Welfare Commission) identify training and skill-building needs of staff of partner agencies.	Timeframe	May 2005	Assigned to	Deputy Director
	1.3.2 Arrange for collaborative trainings (e.g. family engagement training will be offered by the Bay Area Academy in 2004-05).		January – December 2006		Deputy Director
	1.3.3 Increase opportunities to staff cases with interdisciplinary teams to share knowledge and support new skill development of all partners.		January – September 2007		Deputy Director, Supervisors
Discuss changes in identified systemic factors needed to further support the improvement goals. Staff/provider training: we plan to increase and improve opportunities for mutual, collaborative training of our staff and partners					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. We will need assistance from the Bay Area Academy in training staff and partners in family engagement and other topics we identify. We will also need help from the Academy in enhancing the feedback and coaching skills of our supervisors.					
Identify roles of the other partners in achieving the improvement goals.					

Partners (mental health, law enforcement, public health, mandated reporters) will attend cross-training opportunities and will work with us on increased case staffings (ideally that involve parents).

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.
None.

Component D

Outcome/Systemic Factor:					
Systemic Factor: Foster parent recruitment, licensing and retention.					
County's Current Performance:					
San Benito has historically had a small number of county licensed foster homes. With the recent departure of a number of families we now have 6 licensed homes. This lack of local placement resources means that we rely on FFAs (higher cost), many of which are out of county (time and travel issues which affects workers' ability to do monthly visits, arrange parent visits of children in care, etc.).					
Improvement Goal 1.0					
Increase the number of county licensed homes by 100% (6 to 12 homes) by June 2007.					
Strategy 1. 1			Strategy Rationale		
Design and launch a recruitment campaign for county-licensed foster homes.			We need to increase our outreach and recruitment efforts of foster parents, learn from past successes, identify new ideas and involve foster parent(s) and community volunteers in the campaign.		
Milestone	1.1.1	Timeframe		Assigned to	
	Conduct planning meeting to plan for recruitment campaign.				Staff and foster parents
	1.1.2				
	Identify sources of free/low cost recruitment materials to be adapted for use in San Benito.		November 2004		Consultant
	1.1.3				
	Launch recruitment campaign, assess and evaluate effectiveness.		April 2005 – June 2007		Staff and foster parents
Strategy 1. 2			Strategy Rationale		
Increase the capacity of the Department to recruit foster parents.			The Department does not have sufficient staff capacity to dedicate .5 FTE to recruitment of foster parents.		
Milestone	1.2.1.	Timeframe		Assigned to	
	Explore means to hire additional or contract help (foster parent recruiter).				Director
	1.2.2				
	Write position description for foster parent recruiter.		November 2004		Deputy Director
	1.2.3				
	Funding secured, position posted and filled.		December 2004		Deputy Director
Improvement Goal 2.0					
Improve the county's ability to retain and support foster parents.					

Strategy 2. 1 Provide foster parents with the training and support they require to successfully care for the children placed with them.			Strategy Rationale Counties often hear from foster parents that the needs of the children placed in their care overwhelm them and burn them out. Training and support from the county child welfare agency can address these concerns.		
Milestone	2.1.1 Determine training and support needs of foster parents and kin caregivers.	Timeframe	May 2005	Assigned to	Staff with assistance from Bay Area Academy
	2.1.2 Schedule and provide local trainings for foster parents and kin caregivers (and cross-training opportunities for caregivers and staff).		July 2005 – June 2007		Staff and Bay Area Academy
	2.1.3 Address support needs of foster parents (monthly meetings, self-help support groups, potlucks, etc.)		July 2005 – June 2007		
Discuss changes in identified systemic factors needed to further support the improvement goals. None					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. We would like to hear from other small, rural counties who have improved their foster parent recruitment and licensing efforts. We will also need support from the Bay Area Academy to improve training opportunities for foster parents and cross-training opportunities for social work staff and foster parents.					
Identify roles of the other partners in achieving the improvement goals. We plan to partner with community churches, community, and fraternal organizations (Rotarians, Lions’ Club, etc.) to assist with our recruitment campaign.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None.					